

# 2004 FOR PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# P02000122531

Entity Name: FRANCE CRUISES, INC.

FILED  
Jun 18, 2004  
Secretary of State

**Current Principal Place of Business:**

5700 COLLINS AVENUE  
16N  
MIAMI BEACH, FL 33140 US

**New Principal Place of Business:**

**Current Mailing Address:**

5700 COLLINS AVENUE  
16N  
MIAMI BEACH, FL 33140 US

**New Mailing Address:**

FEI Number: 65-1160718

FEI Number Applied For ( )

FEI Number Not Applicable ( )

Certificate of Status Desired ( )

**Name and Address of Current Registered Agent:**

DABROWSKI, JEAN F MR.  
5700 COLLINS AVENUE  
16N  
MIAMI BEACH, FL 33140 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

In accordance with s. 607.193(2)(b), F.S., the corporation did not receive the prior notice.

Election Campaign Financing Trust Fund Contribution ( ).

**OFFICERS AND DIRECTORS:**

Title: P ( ) Delete  
Name: DABROWSKI, JEAN F MR.  
Address: 5700 COLLINS AVENUE #16N  
City-St-Zip: MIAMI BEACH, FL 33140 US

**ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:**

Title: ( ) Change ( ) Addition  
Name:  
Address:  
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: DABROWSKI

PRES

06/18/2004

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date